

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

RECEIVED 

W-02353A
Park Water Company, Inc.
P.O. Box 16173
Phoenix AZ 85011-0000

JUN 07 2004

AZ CORPORATION COMMISSION
DIRECTOR OF UTILITIES

ANNUAL REPORT

FOR YEAR ENDING

| | | |
|-----------|-----------|-------------|
| 12 | 31 | 2003 |
|-----------|-----------|-------------|

FOR COMMISSION USE

| | |
|--------------|-----------|
| Ann04 | 03 |
|--------------|-----------|

COMPANY INFORMATION

Company Name (Business Name) Park Water Co. Inc.

Mailing Address PO Box 16173
(Street)
Phoenix Ariz. 85011
(City) (State) (Zip)

602-789-8080 602-789-7878 602-694-6161
Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

Email Address POConnor40@cox.net

Local Office Mailing Address _____
(Street)

(City) (State) (Zip)

Local Office Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

Email Address _____

MANAGEMENT INFORMATION

Management Contact: Patricia D'Connor
(Name) (Title)

3500 E ~~1st~~ Lincoln Dr. Phx AZ 85018
(Street) (City) (State) (Zip)

602-789-8080 789-7878
Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

Email Address _____

On Site Manager: Clint Arndt
(Name)

(Street) (City) (State) (Zip)

520-251-0679 520-868-1685
Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

Email Address _____

☒ Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: Patricia O'Connor
 (Name)

3500 E Lincoln Dr. Phx Az 85018
 (Street) (City) (State) (Zip)

602-789-8080
 Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

Attorney: Stephen Cooper
 (Name)

221 N. Florence St. Casa Grande Az. 85230
 (Street) (City) (State) (Zip)

520-836-8265
 Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

☒ Please mark this box if the above address(es) have changed or are updated since the last filing.

OWNERSHIP INFORMATION

Check the following box that applies to your company:

- | | |
|---|--|
| <input type="checkbox"/> Sole Proprietor (S) | <input checked="" type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P) | <input type="checkbox"/> Subchapter S Corporation (Z) |
| <input type="checkbox"/> Bankruptcy (B) | <input type="checkbox"/> Association/Co op (A) |
| <input type="checkbox"/> Receivership (R) | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Other (Describe) _____ | |

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

- | | | |
|-------------------------------------|-----------------------------------|---|
| <input type="checkbox"/> APACHE | <input type="checkbox"/> COCHISE | <input type="checkbox"/> COCONINO |
| <input type="checkbox"/> GILA | <input type="checkbox"/> GRAHAM | <input type="checkbox"/> GREENLEE |
| <input type="checkbox"/> LA PAZ | <input type="checkbox"/> MARICOPA | <input type="checkbox"/> MOHAVE |
| <input type="checkbox"/> NAVAJO | <input type="checkbox"/> PIMA | <input checked="" type="checkbox"/> PINAL |
| <input type="checkbox"/> SANTA CRUZ | <input type="checkbox"/> YAVAPAI | <input type="checkbox"/> YUMA |
| <input type="checkbox"/> STATEWIDE | | |

COMPANY NAME

UTILITY PLANT IN SERVICE

| Acct. No. | DESCRIPTION | Original Cost (OC) | Accumulated Depreciation (AD) | O.C.L.D. (OC less AD) |
|--------------|---|-----------------------|-------------------------------------|--------------------------|
| 301 | Organization | | | |
| 302 | Franchises | | | |
| 303 | Land and Land Rights | 3000 | | 3000 |
| 304 | Structures and Improvements | 1348 | 1348 | 0 |
| 307 | Wells and Springs | 36753 | 15241 | 21502 |
| 311 | Pumping Equipment | 44431 | 7741 | 36690 |
| 320 | Water Treatment Equipment | | | |
| 330 | Distribution Reservoirs and Standpipes | 7102 | 158 | 6944 |
| 331 | Transmission and Distribution Mains | 16902 | 16902 | 0 |
| 333 | Services | | | |
| 334 | Meters and Meter Installations | 1450 | 1450 | 0 |
| 335 | Hydrants | | | |
| 336 | Backflow Prevention Devices | | | |
| 339 | Other Plant and Misc. Equipment | | | |
| 340 | Office Furniture and Equipment | | | |
| 341 | Transportation Equipment | | | |
| 343 | Tools, Shop and Garage Equipment | | | |
| 344 | Laboratory Equipment | | | |
| 345 | Power Operated Equipment | | | |
| 346 | Communication Equipment | | | |
| 347 | Miscellaneous Equipment | | | |
| 348 | Other Tangible Plant | | | |
| | TOTALS | 110976 | 42840 | 68136 |

This amount goes on the Balance Sheet Acct. No. 108

COMPANY NAME

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

| Acct. No. | DESCRIPTION | Original Cost (1) | Depreciation Percentage (2) | Depreciation Expense (1x2) |
|--------------|--|----------------------|-----------------------------------|----------------------------------|
| 301 | Organization | | | |
| 302 | Franchises | | | |
| 303 | Land and Land Rights | 3000 | 0 | |
| 304 | Structures and Improvements | 1348 | 3.33 | 0 |
| 307 | Wells and Springs | 45 36743 | 3.33 | 741 |
| 311 | Pumping Equipment | 44431 | 12.50 | 5241 |
| 320 | Water Treatment Equipment | | | |
| 330 | Distribution Reservoirs and Standpipes | 7102 | 2.22 | 158 |
| 331 | Transmission and Distribution Mains | 16902 | 2.00 | 0 |
| 333 | Services | | | |
| 334 | Meters and Meter Installations | 1450 | 8.33 | 0 |
| 335 | Hydrants | | | |
| 336 | Backflow Prevention Devices | | | |
| 339 | Other Plant and Misc. Equipment | | | |
| 340 | Office Furniture and Equipment | | | |
| 341 | Transportation Equipment | | | |
| 343 | Tools, Shop and Garage Equipment | | | |
| 344 | Laboratory Equipment | | | |
| 345 | Power Operated Equipment | | | |
| 346 | Communication Equipment | | | |
| 347 | Miscellaneous Equipment | | | |
| 348 | Other Tangible Plant | | | |
| | TOTALS | 110976 | | 6140 |

This amount goes on Comparative Statement of Income and Expense
Acct. No. 403.

COMPANY NAME

BALANCE SHEET

| Acct. No. | | BALANCE AT BEGINNING OF YEAR | BALANCE AT END OF YEAR |
|--------------|---|------------------------------------|------------------------------|
| | ASSETS | | |
| | | | |
| | CURRENT AND ACCRUED ASSETS | | |
| 131 | Cash | \$ 1682 | \$ 202 |
| 134 | Working Funds | | |
| 135 | Temporary Cash Investments | | |
| 141 | Customer Accounts Receivable | 2118 | 3580 |
| 146 | Notes/Receivables from Associated Companies | | |
| 151 | Plant Material and Supplies | | |
| 162 | Prepayments | | |
| 174 | Miscellaneous Current and Accrued Assets | | |
| | TOTAL CURRENT AND ACCRUED ASSETS | \$ 3800 | \$ 3782 |
| | | | |
| | FIXED ASSETS | | |
| 101 | Utility Plant in Service | \$ 123750 | \$ 110976 |
| 103 | Property Held for Future Use | | |
| 105 | Construction Work in Progress | | |
| 108 | Accumulated Depreciation – Utility Plant | 92813 | 42840 |
| 121 | Non-Utility Property | | |
| 122 | Accumulated Depreciation – Non Utility | | |
| | TOTAL FIXED ASSETS | \$ 30937 | \$ 68136 |
| | | | |
| | TOTAL ASSETS | \$ 34737 | \$ 71918 |

NOTE: The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

COMPANY NAME

BALANCE SHEET (CONTINUED)

| Acct. No. | | BALANCE AT BEGINNING OF YEAR | BALANCE AT END OF YEAR |
|--------------|---|------------------------------------|------------------------------|
| | LIABILITIES | | |
| | CURRENT LIABILITIES | | |
| 231 | Accounts Payable | \$ | \$ |
| 232 | Notes Payable (Current Portion) | | |
| 234 | Notes/Accounts Payable to Associated Companies | | |
| 235 | Customer Deposits | | |
| 236 | Accrued Taxes | 2773 | 2773 |
| 237 | Accrued Interest | | |
| 241 | Miscellaneous Current and Accrued Liabilities | | |
| | TOTAL CURRENT LIABILITIES | \$ 2773 | \$ 2773 |
| | LONG-TERM DEBT (Over 12 Months) | | |
| 224 | Long-Term Notes and Bonds | \$ | \$ |
| | DEFERRED CREDITS | | |
| 251 | Unamortized Premium on Debt | \$ | \$ |
| 252 | Advances in Aid of Construction | | |
| 255 | Accumulated Deferred Investment Tax Credits | | |
| 271 | Contributions in Aid of Construction | | |
| 272 | Less: Amortization of Contributions | | |
| 281 | Accumulated Deferred Income Tax | | |
| | TOTAL DEFERRED CREDITS | \$ | \$ |
| | TOTAL LIABILITIES | \$ 2773 | \$ 2773 |
| | CAPITAL ACCOUNTS | | |
| 201 | Common Stock Issued | \$ | \$ |
| 211 | Paid in Capital in Excess of Par Value | | |
| 215 | Retained Earnings | 31964 | 69145 |
| 218 | Proprietary Capital (Sole Props and Partnerships) | | |
| | TOTAL CAPITAL | \$ | \$ 69145 |
| | TOTAL LIABILITIES AND CAPITAL | \$ 34737 | \$ 71918 |

COMPANY NAME

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

| Acct. No. | OPERATING REVENUES | PRIOR YEAR | CURRENT YEAR |
|-----------|---|-------------------|--------------|
| 461 | Metered Water Revenue | \$ 48099.48 | \$ |
| 460 | Unmetered Water Revenue | | |
| 474 | Other Water Revenues | | |
| | TOTAL REVENUES | \$ 48099.48 | \$ 51,133 |
| | | | |
| | OPERATING EXPENSES | | |
| 601 | Salaries and Wages | \$ 1195.00 | \$ 1810 |
| 610 | Purchased Water | | 2360 |
| 615 | Purchased Power | 6330.64 | 8719 |
| 618 | Chemicals | 267.00 | 559 |
| 620 | Repairs and Maintenance | 10 010.00 | 976 |
| 621 | Office Supplies and Expense | 1412.00 | 4360 |
| 630 | Outside Services | 565.62 | 22044 |
| 635 | Water Testing | 565.62 | 1399 |
| 641 | Rents | | |
| 650 | Transportation Expenses | 988.00 | 950 |
| 657 | Insurance - General Liability | | |
| 659 | Insurance - Health and Life | 3600.00 | 3900 |
| 666 | Regulatory Commission Expense - Rate Case | | 2500 |
| 675 | Miscellaneous Expense | | 442 |
| 403 | Depreciation Expense | | 6140 |
| 408 | Taxes Other Than Income | 625.00 | |
| 408.11 | Property Taxes | | 3000 |
| 409 | Income Tax | | |
| | TOTAL OPERATING EXPENSES | \$ 24 993.26 | \$ 59159 |
| | | | |
| | OPERATING INCOME/(LOSS) | \$ | \$ <8026> |
| | | | |
| | OTHER INCOME/(EXPENSE) | | |
| 419 | Interest and Dividend Income | \$ | \$ |
| 421 | Non-Utility Income | | |
| 426 | Miscellaneous Non-Utility Expenses | | |
| 427 | Interest Expense | | |
| | TOTAL OTHER INCOME/(EXPENSE) | \$ | \$ |
| | | | |
| | NET INCOME/(LOSS) | \$ 23106.22 | \$ <8026> |

COMPANY NAME

SUPPLEMENTAL FINANCIAL DATA

Long-Term Debt

| | LOAN #1 | LOAN #2 | LOAN #3 | LOAN #4 |
|------------------------|----------------|----------------|----------------|----------------|
| Date Issued | | | | |
| Source of Loan | | | | |
| ACC Decision No. | | | | |
| Reason for Loan | | | | |
| Dollar Amount Issued | \$ | \$ | \$ | \$ |
| Amount Outstanding | \$ | \$ | \$ | \$ |
| Date of Maturity | | | | |
| Interest Rate | | | | |
| Current Year Interest | \$ | \$ | \$ | \$ |
| Current Year Principle | \$ | \$ | \$ | \$ |

Meter Deposit Balance at Test Year End \$ _____

Meter Deposits Refunded During the Test Year \$ _____

COMPANY NAME

Park Water

WATER COMPANY PLANT DESCRIPTIONWELLS

| ADWR ID Number* | Pump Horsepower | Pump Yield (Gpm) | Casing Depth (Feet) | Casing Diameter (Inches) | Meter Size (inches) | Year Drilled |
|--|-----------------|------------------|---------------------|--------------------------|---------------------|--------------|
| 630014 | | | | | | |
| 630011 | | | | | | |
| South well | 15 | 75 | 650 | 8 | 2 | ? |
| + North well | 20 | 100 | 680 | 8 | 2 | 2003 |
| (+ Note: North Well site was placed into service in April 2004.) | | | | | | |

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

| Name or Description | Capacity (gpm) | Gallons Purchased or Obtained (in thousands) |
|-------------------------|----------------|--|
| Water hauled | — | 1,125,000 |

| BOOSTER PUMPS | | FIRE HYDRANTS | |
|---------------------------|--------------|-------------------|----------------|
| Horsepower | Quantity | Quantity Standard | Quantity Other |
| 1/2 | 1 | — | — |
| 5-Hp & 10-Hp e South well | 2 | | |
| 7-1/2-Hp e North well | 1 | | |
| 5-Hp e Booster Sta. #1 | 1 | | |

| STORAGE TANKS | | PRESSURE TANKS | |
|--------------------------|----------|----------------------|---------------------|
| Capacity | Quantity | Capacity | Quantity |
| 12,000 e Booster Sta. #1 | 1 | 500 gal | 1 e South well |
| 25,000 e South well | 1 | 1,000 gal | |
| 15,000 e North well | 1 | 2,000 gal | 1 e Booster Sta. #1 |
| | | 3,000 gal | 1 e North well |

COMPANY NAME

Part Water

WATER COMPANY PLANT DESCRIPTION (CONTINUED)**MAINS**

| Size (in inches) | Material | Length (in feet) |
|------------------|----------|------------------|
| 2 | ? | 1,810 |
| 3 | ? | 2,820 |
| 4 | PVC | 18,390 |
| 5 | | |
| 6 | PVC | 6,050 |
| 8 | | |
| 10 | | |
| 12 | | |
| | total: | 29,070 |
| | | |
| | | |
| | | |

CUSTOMER METERS

| Size (in inches) | Quantity |
|------------------|----------|
| 5/8 X 3/4 | |
| 3/4 | 123 |
| 1 | |
| 1 1/2 | |
| 2 | |
| Comp. 3 | |
| Turbo 3 | |
| Comp. 4 | |
| Tubo 4 | |
| Comp. 6 | |
| Tubo 6 | |
| | |
| | |

For the following three items, list the utility owned assets in each category.

TREATMENT EQUIPMENT:

Chlorinator South Well site

STRUCTURES:**OTHER:**

COMPANY NAME: Park Water**WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2003**

| MONTH | NUMBER OF CUSTOMERS | GALLONS SOLD | GALLON PUMPED (Thousands) |
|-----------|---------------------|--------------|------------------------------|
| JANUARY | 127 | 734,990 | 679,400 |
| FEBRUARY | 121 | 599,130 | 620,500 |
| MARCH | } | 796,510 | 826,200 |
| APRIL | | 1,293,620 | 1,301,800 |
| MAY | | 1,319,970 | 1,326,300 |
| JUNE | | 1,774,721 | 2,030,100 |
| JULY | | 1,063,311 | 1,041,600 |
| AUGUST | } | 1,102,023 | 1,109,700 |
| SEPTEMBER | | 1,250,213 | 1,256,900 |
| OCTOBER | 122 | 915,999 | 917,300 |
| NOVEMBER | 123 | 755,890 | 755,400 |
| DECEMBER | 124 | 888,060 | 890,700 |
| TOTAL | | N/A | |

Is the Water Utility located in an ADWR Active Management Area (AMA)?

(✓) Yes

() No

Does the Company have An ADWR Gallons Per Capita Per Day (GPCPD) requirement?

() Yes

(✓) No

If yes, provide the GPCPD amount: _____

What is the level of arsenic for each well on your system.

(If more than one well, please list each separately)

.0004 mg/lSouth well.0008North well

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME _____ YEAR ENDING 12/31/2003

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2003 was: \$ 0

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. _____

Paid in full in 2004

COMPANY NAME _____

YEAR ENDING 12/31/2003

INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported _____
Estimated or Actual Federal Tax Liability _____

State Taxable Income Reported _____
Estimated or Actual State Tax Liability _____

Amount of Grossed-Up Contributions/Advances: _____

Amount of Contributions/Advances _____
Amount of Gross-Up Tax Collected _____
Total Grossed-Up Contributions/Advances _____

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

SIGNATURE

DATE

PRINTED NAME

TITLE

**VERIFICATION
AND
SWORN STATEMENT
RESIDENTIAL REVENUE
INTRASTATE REVENUES ONLY**

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

| | |
|---|-------------------|
| (COUNTY NAME) <u>Maricopa</u> | |
| NAME (OWNER OR OFFICIAL) <u>Patricia O'Connor</u> | TITLE <u>Pres</u> |
| COMPANY NAME <u>Park Water Co. Inc</u> | |

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

| | | |
|-----------|-----------|-------------|
| MONTH | DAY | YEAR |
| <u>12</u> | <u>31</u> | <u>2003</u> |

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2003 WAS:

| |
|---|
| ARIZONA INTRASTATE GROSS OPERATING REVENUES |
| \$ <u>51,133</u> |

(THE AMOUNT IN BOX AT LEFT
INCLUDES \$
IN SALES TAXES BILLED, OR COLLECTED

*RESIDENTIAL REVENUE REPORTED ON THIS PAGE
MUST INCLUDE SALES TAXES BILLED.

Patricia O'Connor
SIGNATURE OF OWNER OR OFFICIAL

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

| |
|------------|
| <u>7th</u> |
|------------|

DAY OF

(SEAL)



MY COMMISSION EXPIRES

Aug. 12, 2004

| |
|---|
| NOTARY PUBLIC NAME <u>Monica A. Martinez</u> |
| COUNTY NAME <u>Maricopa</u> |
| MONTH <u>June 7,</u> <u>2004</u> |

X Monica A. Martinez
SIGNATURE OF NOTARY PUBLIC

**VERIFICATION
AND
SWORN STATEMENT**
Intrastate Revenues Only

VERIFICATION

STATE OF _____
I, THE UNDERSIGNED
OF THE

| |
|--------------------------------|
| COUNTY OF (COUNTY NAME) |
| NAME (OWNER OR OFFICIAL) TITLE |
| COMPANY NAME |

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA COPORATION COMMISSION

FOR THE YEAR ENDING

| | | |
|-------|-----|------|
| MONTH | DAY | YEAR |
| 12 | 31 | 2003 |

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2003 WAS:

Arizona IntraState Gross Operating Revenues Only (\$)

\$ 51,133

(THE AMOUNT IN BOX ABOVE
INCLUDES \$ _____
IN SALES TAXES BILLED, OR COLLECTED

****REVENUE REPORTED ON THIS PAGE MUST
INCLUDE SALES TAXES BILLED OR
COLLECTED. IF FOR ANY OTHER REASON,
THE REVENUE REPORTED ABOVE DOES NOT
AGREE WITH TOTAL OPERATING REVENUES
ELSEWHERE REPORTED, ATTACH THOSE
STATEMENTS THAT RECONCILE THE
DIFFERENCE. (EXPLAIN IN DETAIL)**

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 7th DAY OF

(SEAL)

MY COMMISSION EXPIRES 10/23/06

SIGNATURE OF OWNER OR OFFICIAL

TELEPHONE NUMBER

COUNTY NAME

MONTH

NOTARY PUBLIC

STATE OF ARIZONA

Maricopa County

SIGNATURE OF NOTARY PUBLIC

My Commission Expires 10/23/06